

#3
Attorney Docket No.: 38080.0032

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As the below named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name;

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LAYERED CALIBRATION STANDARD FOR TISSUE SAMPLING

the specification of which: is attached hereto.
 was filed on: February 6, 2002
as Application No.: 10/066,778
and was amended on: _____ (if applicable).

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56.

And I hereby authorize and request our agents, Heller Ehrman White & McAuliffe LLP, whose address is set forth below, to insert above, the filing date and application number of said application when known.

Prior Foreign Application(s)

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Country	Application Number	Date of Filing (day, month, year)	Date of Issue (day, month, year)	Priority Claimed
				Yes <input type="checkbox"/> No <input type="checkbox"/>

Prior Provisional Application(s)

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

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60/266,470	6 February 2001

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America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

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And I hereby appoint, both jointly and severally, as my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith the following attorneys, their registration numbers being listed after their names:

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All correspondence and telephone communications should be addressed to Heller Ehrman White & McAuliffe LLP; Intellectual Property Department; 101 Orchard Ridge Drive, Suite 300, Gaithersburg, MD 20878-1917; telephone number (301) 721-6100; facsimile number (301) 721-6299, which is also the address, telephone and facsimile numbers of each of the above listed attorneys.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature _____ Date _____

Full Name of
First Inventor: Apruzzese William
(Family Name) (First Given Name) (Second Given Name)
Citizenship: US
Residence: 83 Clinton Street, Everett, Massachusetts 02129
Post Office
Address: 83 Clinton Street, Everett, Massachusetts 02129

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Intellectual Property Department
101 Orchard Ridge Dr., Suite 300
Gaithersburg, MD 20878-1917
(301) 721-6100 (telephone); (301) 721-6299 (facsimile)

Page 2

Signature _____ Date _____

Full Name of
Second Inventor: Trepagnier Pierre
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

Residence: 150 Brooks Street, Medford, Massachusetts 02155

Post Office
Address: 150 Brooks Street, Medford, Massachusetts 02155

Signature Russell T. Gray Date May 17, 2002

Full Name of
Third Inventor: Gray Russell
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

Residence: 4310 Clifford Road, Brownsburg, Indiana 46112

Post Office
Address: 4310 Clifford Road, Brownsburg, Indiana 46112

Signature _____ Date _____

Full Name of
Fourth Inventor: Mansfield James
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

Residence: 25 Petersbourough Street, Apt. 22, Boston, Massachusetts 02215

Post Office
Address: 25 Petersbourough Street, Apt. 22, Boston, Massachusetts 02215

Signature _____ Date _____

Full Name of
Fifth Inventor: Lambert Christopher
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

Residence: 78 Manning Street, Hudson, Massachusetts 01749

Post Office
Address: 78 Manning Street, Hudson, Massachusetts 01749

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Signature James Mansfield Date May 24, 2002

Full Name of
Fourth Inventor: Mansfield James
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

Residence: 25 Petersbourough Street, Apt. 22, Boston, Massachusetts 02215

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Address: 25 Petersbourough Street, Apt. 22, Boston, Massachusetts 02215

Signature Christopher D. Lambert Date May 15, 2002

Full Name of
Fifth Inventor: Lambert Christopher
(Family Name) (First Given Name)
(Second Given Name)

Citizenship: US

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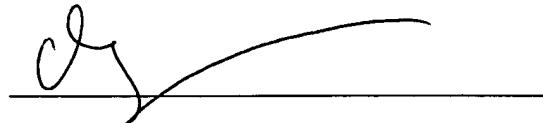
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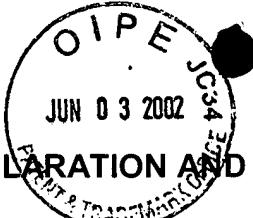
Date

5/17/2002

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Signature



Date May 30, 2002

Full Name of
Second Inventor:

Trepagnier
(Family Name)

Pierre
(First Given Name)

(Second Given Name)

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Full Name of
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Russell
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Date

Full Name of
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Mansfield
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James
(First Given Name)

(Second Given Name)

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Signature

Date

Full Name of
Fifth Inventor:

Lambert
(Family Name)

Christopher
(First Given Name)

(Second Given Name)

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